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B1 (Official Form 1)(04/13)				ournorn.		go <u> </u>					
		United No		Banki District						Vo	luntary	Petition
Name of Debtor (if Harris, Michael		nter Last, First,	Middle):			Name	of Joint De	ebtor (Spouse)	(Last, First	, Middle):		
All Other Names us (include married, m			3 years					used by the Jo			8 years	
AKA Michael		de names).				(inclu	uc marrieu,	maiden, and	rade names	,.		
Last four digits of S (if more than one, state all)	oc. Sec. or Inc	dividual-Taxpa	yer I.D. ((ITIN)/Com	plete EIN	Last fo	our digits o	f Soc. Sec. or	Individual-	Гахрауег I	.D. (ITIN) N	Io./Complete EIN
xxx-xx-9866 Street Address of D	ebtor (No. and	l Street, City, a	ınd State)):		Street	Address of	Joint Debtor	(No. and St	reet, City, a	and State):	
920 Sweetlow	er Drive	, ,	,							•		
Hoffman Esta	tes, IL				ZIP Code							ZIP Code
County of Residence	on of the Dai	maimal Dlaga a	f Duainas		60169	Count	y of Poside	ence or of the	Dringing DL	aga of Pus	inacci	
Cook	e or or the Pri	ncipal Place of	Dusilles	S.		Count	y of Keside	ince of of the	rinicipai ri	ice of Busi	mess.	
Mailing Address of	Debtor (if diff	ferent from str	eet addres	ss):		Mailir	ng Address	of Joint Debto	or (if differe	nt from str	eet address):	
				Г	ZIP Code							ZIP Code
Location of Principa	al Assets of B	usiness Debtor										
(if different from str	eet address at	oove):										
Typ (Form of Organ	oe of Debtor	cono hov)			of Business	1		-	-		Under Whi	ch
Individual (inclu	ides Joint Deb	otors)		lth Care Bu	siness		■ Chapt		etition is Fi	led (Check	k one box)	
See Exhibit D on p Corporation (inc				gle Asset Re 1 U.S.C. §		defined	☐ Chapt	er 9			Petition for R Main Proce	
☐ Partnership		,	☐ Rail	road	()		☐ Chapt			Ü	Petition for R	C
Other (If debtor i check this box and			☐ Stockbroker☐ Commodity Broker			Chapt		of	a Foreign	Nonmain Pr	coceeding	
			Clea	aring Bank					NI - 4	f D - L 4 -		
Chaps Country of debtor's ce	ter 15 Debtor				mpt Entity	7	┧		(Checl	e of Debts k one box)	_	
			□ Debt	(Check box tor is a tax-ex	, if applicabl		Debts a defined	are primarily con d in 11 U.S.C. §	nsumer debts, 101(8) as			s are primarily ness debts.
Each country in which by, regarding, or again			unde	er Title 26 of e (the Interna	the United S	tates	"incurr	ed by an individual, family, or l	lual primarily			
	Filing Fee (Check one box		c (inc interna		one box:		Chapt	ter 11 Debt	ors		
Full Filing Fee atta			,		<u> </u>	Debtor is a sr		debtor as defin				
Filing Fee to be pa					Check	if:		ness debtor as d		_		
debtor is unable to												ders or affiliates) ee years thereafter).
Filing Fee waiver	requested (annli	cable to chapter	7 individu	ale only). Mr		all applicable			<u> </u>		<u> </u>	
attach signed appl					3B. 🗖 1	Acceptances	of the plan w	this petition.	epetition from	one or mor	re classes of cr	reditors,
Statistical/Adminis	strative Infor	mation			1	n accordance	e with 11 U.S	S.C. § 1126(b).	THIS	S SPACE IS	FOR COURT	USE ONLY
Debtor estimates												
Debtor estimates there will be no						ive expense	es paid,					
Estimated Number	of Creditors											
1- 49 99	100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Assets	•		•									
\$0 to \$50,00		o \$500,001	\$1,000,001	\$10,000,001	\$50,000,001	\$100,000,001						
\$50,000 \$100,0	00 \$500,000	to \$1	to \$10 million	to \$50 million	to \$100 million	to \$500 million	to \$1 billion					
Estimated Liabilities	S											
\$0 to \$50,00 \$50,000 \$100,0	1 to \$100,001 t 00 \$500,000	o \$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million		\$500,000,001 to \$1 billion	More than				

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B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Harris, Michael I (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Gary Newland June 18, 2015 Signature of Attorney for Debtor(s) (Date) Garv Newland 06217146 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13)

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Michael I Harris

Signature of Debtor Michael I Harris

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

June 18, 2015

Date

Signature of Attorney*

X /s/ Gary Newland

Signature of Attorney for Debtor(s)

Gary Newland 06217146

Printed Name of Attorney for Debtor(s)

Newland & Newland LLP

Firm Name

121 S. Wilke Ste #301 Arlington Heights, IL 60005

Address

Email: gary@newlandlaw.com (847) 797-8000 Fax: (847) 797-9090

Telephone Number

June 18, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Harris, Michael I

Signatures

Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

v
Δ

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

T
v

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

In re	Michael I Harris		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
deficiency so as to be incapable of realizing a responsibilities.); □ Disability. (Defined in 11 U.S.C. §	109(h)(4) as impaired by reason of mental illness or mental and making rational decisions with respect to financial 109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Michael I Harris Michael I Harris
Date: June 18, 2015	

В

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Michael I Harris		Case No		
-		Debtor	,		
			Chapter	7	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	275,000.00		
B - Personal Property	Yes	4	3,380.38		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		271,970.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		15,452.51	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		56,229.85	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			6,250.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			9,824.54
Total Number of Sheets of ALL Schedules		24			
	T	otal Assets	278,380.38		
			Total Liabilities	343,652.36	

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

In re	Michael I Harris		Case No.		
		Debtor	,		
			Chapter	7	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	4,848.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	10,604.51
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	24,594.04
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	40,046.55

State the following:

Average Income (from Schedule I, Line 12)	6,250.00
Average Expenses (from Schedule J, Line 22)	9,824.54
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	6,616.78

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	10,604.51	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		4,848.00
4. Total from Schedule F		56,229.85
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		61,077.85

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B6A (Official Form 6A) (12/07)

In re	Michael I Harris	Case No.
-		,
		L)ehtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Personal residence at 920 Sweetflower Drive,	Fee Simple	н	275,000.00	271,970.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Zillow estimate \$279,109 Debtor believe based on area sales that value is \$260,000 but median Eppraisal number used for this petition

> Sub-Total > 275,000.00 (Total of this page)

275,000.00 Total >

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re Mic	ichael I Harris	Case No.
-	Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of P	roperty	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand		Cash on hand or in debtor's possession	-	20.00
2. Checking, savings		Checking Account at First Merit Bank #9743	-	143.24
accounts, certifica shares in banks, sa thrift, building and homestead associa unions, brokerage	avings and loan, d loan, and ations, or credit	Business Checking Account First Merit Bank #8219 Finansco Commercial Mortgages. Wholly part of debtor's estate.	-	5.00
cooperatives.	nouses, or	Checking account at First Merit Bank #3833 M I Harris. Wholly part of debtor's estate.	-	412.11
3. Security deposits utilities, telephone landlords, and oth	e companies,	x		
4. Household goods including audio, v computer equipme	rideo, and	Regular and Customary Furniture, Home furnishings, Appliances, Kitchenware,Home electronics;Household goods and sundries. Debtor just married 6 months and much property is non-marital. Debtor's belongings approximate value is \$1500		1,500.00
5. Books, pictures ar objects, antiques, record, tape, compother collections of	stamp, coin, pact disc, and	Misc CDs, DVDs, Books and non collectible wall art Owned jointly with non-filing spouse.	-	200.00
6. Wearing apparel.		Usual and Necessary Wearing Apparel Debtor's only	-	500.00
7. Furs and jewelry.		x		
8. Firearms and spor and other hobby e	ts, photographic, equipment.	x		
9. Interests in insurar Name insurance c policy and itemize refund value of ea	ompany of each e surrender or	Mass Mutual 20 year Term policy with Face value of \$100K, Children are beneficiaries, no present value	Н	0.00

3 continuation sheets attached to the Schedule of Personal Property

2,780.35

Sub-Total >

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

In re	Michael I Harris	Case No.
_		

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10.	Annuities. Itemize and name each issuer.	Х			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Fidelity 401(K) #6998	-	0.03
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.		Finan\$eCo, Inc. Business for receiving funds. All revenues from this business flow into the other corporation M I Harris, Inc and are recorded there as income. No residual value or other value associated with this corporation. All value is in checking account listed on this schedule.	-	0.00
			M.I. Harris, Inc. 100% ownership of debtor's business. Business receives commissions and all revenue received by Finesco, Inc. Business has limited hard expenses except income to debtor. Total value of this business rest in its checking account as of the date of filing. listed elsewhere on this schedule.	-	0.00
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
			(Total	Sub-Tota of this page)	al > 0.03

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Michael I Harris	Case No.	
			

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

		N		Husband,	Current Value of
	Type of Property	O N E	Description and Location of Froperty	JOHR, OF	Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	х			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	Х			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	Х			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	Х			
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	Х			
28.	Office equipment, furnishings, and supplies.	Х			
29.	Machinery, fixtures, equipment, and supplies used in business.		Computer and peripherals used for business	-	600.00
30.	Inventory.	Х			
31.	Animals.	Х			
				Sub-Tota	al > 600.00
				(Total of this page)	

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Michael I Harris	Case No.
		Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 3,380.38 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Michael I Harris	Case No
-		,

Debtor

SCHEDULE C	c - PROPERTY	CLAIMED .	AS EXEMPT		
Debtor claims the exemptions to which debtor is entitled (Check one box) ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)	under:	\$155,675. (A)	neck if debtor claims a homestead exemption that exceeds 55,675. (Amount subject to adjustment on 4/1/16, and every three years therea with respect to cases commenced on or after the date of adjustment.)		
Description of Property	Specify Law Each Exe		Value of Claimed Exemption	Current Value of Property Without Deducting Exemption	
Real Property Personal residence at 920 Sweetflower Drive, Hoffman Estates IL 60169 Eppraisal . \$275,610 Zillow estimate \$279,109 Debtor believe based on area sales that value is \$260,000 but median Eppraisal number used for this petition	735 ILCS 5/12-901		3,030.00	275,000.00	
<u>Cash on Hand</u> Cash on hand or in debtor's possession	735 ILCS 5/12-100	01(b)	20.00	20.00	
Checking, Savings, or Other Financial Accounts, Checking Account at First Merit Bank #9743	Certificates of Depo-	<u>sit</u> 11(b)	100%	143.24	
Business Checking Account First Merit Bank #8219 Finansco Commercial Mortgages. Wholly part of debtor's estate.	735 ILCS 5/12-100	91(b)	5.00	5.00	
Checking account at First Merit Bank #3833 M I Harris. Wholly part of debtor's estate.	735 ILCS 5/12-100	11(b)	412.11	412.11	
Household Goods and Furnishings Regular and Customary Furniture, Home furnishings, Appliances, Kitchenware,Home electronics;Household goods and sundries. Debtor just married 6 months and much property is non-marital. Debtor's belongings approximate value is \$1500	735 ILCS 5/12-100	11(b)	1,500.00	1,500.00	
Books, Pictures and Other Art Objects; Collectible Misc CDs, DVDs, Books and non collectible wall art Owned jointly with non-filing spouse.	es 735 ILCS 5/12-100	01(b)	200.00	400.00	
Wearing Apparel Usual and Necessary Wearing Apparel Debtor's only	735 ILCS 5/12-100)1(a)	500.00	500.00	
Interests in Insurance Policies Mass Mutual 20 year Term policy with Face value of \$100K, Children are beneficiaries, no present value	215 ILCS 5/238		0.00	0.00	
Interests in IRA, ERISA, Keogh, or Other Pension Fidelity 401(K) #6998	or Profit Sharing Pla 735 ILCS 5/12-100		0.03	0.03	

_____ continuation sheets attached to Schedule of Property Claimed as Exempt

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B6C (Official Form 6C) (4/13) -- Cont.

In re	Michael I Harris	Case No.	
_		Debtor	

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT (Continuation Sheet)

	(
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption		
Stock and Interests in Businesses Finan\$eCo, Inc. Business for receiving funds. All revenues from this business flow into the other corporation M I Harris, Inc and are recorded there as income. No residual value or other value associated with this corporation. All value is in checking account listed on this schedule.	735 ILCS 5/12-1001(b)	0.00	0.00		
Machinery, Fixtures, Equipment and Supplies Use Computer and peripherals used for business	<u>d in Business</u> 735 ILCS 5/12-1001(d)	600.00	600.00		

Total: 6,410.38 278,580.38 Case 15-21364 Doc 1 Filed 06/20/15 Entered 06/20/15 12:55:14 Desc Main Page 15 of 55 Document

B6D (Official Form 6D) (12/07)

In re	Michael I Harris	Case No
-		
		Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	1	111	Johand Wife Joint or Community	C	U	D	AMOUNT OF		
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	OR L I QU I DATE	I SP UT u	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY	
Account No. xxxxxx9079			Opened 12/01/14 Last Active 2/17/15	Т	E D				
Bmo Harris Bank - Bankruptcy DeptBrk-1 770 N Water Street Milwaukee, WI 53202		-	Second Mortgage Personal residence at 920 Sweetflower Drive, Hoffman Estates IL 60169 Eppraisal . \$275,610 Zillow estimate \$279,109 Debtor believe based on area sales that value is \$260,000 but median Eppraisal number used for this petition		D				
	╀	_	Value \$ 275,000.00				23,710.00	0.00	
Account No. xxxxxxxxx5855 Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701		-	Opened 5/01/08 Last Active 12/19/14 Mortgage Personal residence at 920 Sweetflower Drive, Hoffman Estates IL 60169 Eppraisal . \$275,610 Zillow estimate \$279,109 Debtor believe based on area sales that value is \$260,000 but median Eppraisal number used for this petition						
	╀	╀	Value \$ 275,000.00				248,260.00	0.00	
Account No.			Value \$						
Account No.									
			Value \$						
continuation sheets attached			S (Total of th	ubt nis j			271,970.00	0.00	
	Total (Report on Summary of Schedules) 271,970.00 0.00								

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B6E (Official Form 6E) (4/13)

In re	Michael I Harris	Case No.	
-		Debtor	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

■ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Michael I Harris	Case No.
-		Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Domestic Support Obligations

TYPE OF PRIORITY UNLLQULDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Domestic support arrearage. Account No. Kathleen Harris 4,848.00 **870 Dovington Court** Hoffman Estates, IL 60169 4,848.00 0.00 Account No. Account No. Account No. Account No. Subtotal 4,848.00 Sheet 1 of 2 continuation sheets attached to

(Total of this page)

Schedule of Creditors Holding Unsecured Priority Claims

0.00

4,848.00

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B6E (Official Form 6E) (4/13) - Cont.

In re	Michael I Harris		Case No.
_		Debtor	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Account No. xxxxxxx 1040 2013 taxes Internal Revenue Service 0.00 **Centralized Insolvency Operations** PO Box 7346 Philadelphia, PA 19101-7346 9,857.51 9,857.51 Account No. xxxxxxx 1040 2014 taxes Internal Revenue Service 0.00 **Centralized Insolvency Operations** PO Box 7346 Philadelphia, PA 19101-7346 747.00 747.00 Account No. Account No. Account No. Subtotal 0.00 Sheet **2** of **2** continuation sheets attached to (Total of this page) 10,604.51 Schedule of Creditors Holding Unsecured Priority Claims 10,604.51 Total 4,848.00 (Report on Summary of Schedules) 15,452.51 10,604.51

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B6F (Official Form 6F) (12/07)

In re	Michael I Harris		Case No.	
-		Debtor	.,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	C O D E B T	Hi H W J		C N T I	UNLIGUI	D I S P U T	AMOUNT OF CLAIM
(See instructions above.)	O R	С	is subject to setort, so state.	i	I D A T		
Account No. xx1724			2/2015 Medical Services	Ϊ	ΙE		
Advocate Medical Group- Cardiology 1901 S Meyers Road, Suite 350 Villa Park, IL 60181		-	Medical Services		D	'	
A			Out and 10/04/05 1 and		L		115.04
Account No. xxxxxxxxxxxxxx0001 Aes/Nct Aes/Ddb Po Box 8183 Harrisburg, PA 17105	x	-	Opened 8/01/05 Last Active 3/05/15 Educational				
							3,177.00
Account No. xxxxxxxxxxxxxx0002 Aes/Nct Aes/Ddb Po Box 8183 Harrisburg, PA 17105	x	_	Opened 2/01/06 Last Active 3/05/15 Educational				2,997.00
Account No. xxxxxxxxxxxxx3473 American Express Po Box 3001 16 General Warren Blvd Malvern, PA 19355		_	Opened 8/01/80 Last Active 4/26/15 Credit Card				
							4,223.00
_6 continuation sheets attached			(Total	Sub of this			10,512.04

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B6F (Official Form 6F) (12/07) - Cont.

In re	Michael I Harris	Case No.	_
_		Debtor	

				_			
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	ONL QU DAT	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx5303	Γ		Opened 7/01/80 Last Active 5/01/15	Т	E		
American Express Po Box 3001 16 General Warren Blvd Malvern, PA 19355		-	Credit Card		D		493.00
Account No. x3533			9/2014 Medical Services				
Bakal Dermatology Associates 1786 Moonlake Blvd #100 Hoffman Estates, IL 60169-1016		-	micalcal collylocs				
							136.00
Account No. Cadence-Central Dupage Hospital 25 North Winfield Road Winfield, IL 60190		-	Medical Services				1,756.15
Account No. xxxxxxxx9592 Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364		-	Opened 8/01/14 Collection Attorney Radiological Consultants Of Wo				409.00
Account No. xxxxxxxxxxxx0502 Chase Bp Prvt Lbl Po Box 15298 Wilmington, DE 19850		-	Opened 3/01/81 Last Active 4/09/15 Charge Account				105.00
Sheet no1 of _6 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt			2,899.15

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B6F (Official Form 6F) (12/07) - Cont.

In re	Michael I Harris	Case No.	
		Debtor	

CDEDITOD'S NAME	С	Hu	sband, Wife, Joint, or Community	С	U	Г	οТ	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	QULD	T E	S P U T E	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx6928			Opened 7/01/02 Last Active 2/11/15	T	A T E D			
Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195		-	Credit Card		D			7,088.00
Account No. x9723			2014					
Drs Garb & Mcguire 1710 N Randall Road 250 Elgin, IL 60123-9408		-	Medical Services					95.74
Account No. xxxxxxxxxxxx0001	┞		Opened 8/01/12 Last Active 3/31/15	+	╀	╁	\dashv	
Fed Loan Serv Po Box 60610 Harrisburg, PA 17106	x	-	Educational					7,000.00
Account No. xxxxxxxxxxxxx0002	T		Opened 8/01/12 Last Active 3/31/15	T	T	T	T	
Fed Loan Serv Po Box 60610 Harrisburg, PA 17106	x	-	Educational					3,167.04
Account No. Physician services	1		collection co for medical services	T	Ī	T	7	
HRRG PO Box 5406 Cincinnati, OH 45273-7942		_						237.00
Sheet no. 2 of 6 sheets attached to Schedule of	_	-		Sub	tota	al	†	47.505.50
Creditors Holding Unsecured Nonpriority Claims			(Total of	his	pag	ge)) [17,587.78

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B6F (Official Form 6F) (12/07) - Cont.

In re	Michael I Harris		Case No.	
_		Debtor	,	

CDEDITOD'S NAME	Ç	Hu	sband, Wife, Joint, or Community	C	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	LIQUID	U T E D	AMOUNT OF CLAIN
Account No. xxxx7898			Opened 7/01/14 Last Active 10/30/14	Т	A T E		
Illinois Collection Service/ICS Illinois Collection Service Po Box 1010 Tinley Park, IL 60477		-	Collection Attorney M W S		D		483.00
Account No. xx2396	╁		2013		+		
Insomnia Treatment Specialists 3633 West Lake Av #404 Glenview, IL 60026-5801		-	Medical Services				100.00
Account No. xxxxxxxxxxx4438			Opened 2/01/13 Last Active 4/09/15				
Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051		-	Charge Account				92.00
Account No. xxx0746	┢		1/16/2014		\vdash		
Life Watch 10255 W Higgins Rd Des Plaines, IL 60018-5606		-	Medical Services				250.00
Account No. xx1525	H		Opened 9/01/13 Last Active 5/21/14		\dagger		
Med Business Bureau Po Box 1219 Park Ridge, IL 60068		-	Collection Attorney Med1 02 North Shore Medical Group				380.00
Sheet no. 3 of 6 sheets attached to Schedule of	_			Sub	tota	al	4 205 22
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	1,305.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Michael I Harris	Case No.
_		Debtor

Account No. Accou		_			-		-	T
AND ACCOUNT NUMBER (See instructions above.) Account No. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community		N	D	
AND ACCOUNT NUMBER (See instructions above.) Account No. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MAILING ADDRESS	Ď		DATE OF AIM WAS DISTIBLED AND	Ň	Ļ	S	
Account No. xxxxxxx1886 Merchants Cr 223 W. Jackson Blvd. Suite 400 Chicago, IL 60606 Account No. Mowery and Associates 475 Half Day Rd Lincolnshire, IL 60069 Account No. xxxxxxxxxxxxxx4426 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Medical Services Medical Services Medical Services Subtotal Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx		В				Q	U	
Account No. xxxxxxx1886 Merchants Cr 223 W. Jackson Blvd. Suite 400 Chicago, IL 60606 Account No. Mowery and Associates 475 Half Day Rd Lincolnshire, IL 60069 Account No. xxxxxxxxxxxxxx4426 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Medical Services Medical Services Medical Services Subtotal Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx		T			N	U	T	AMOUNT OF CLAIM
Merchants Cr 223 W. Jackson Blvd. Suite 400 Chicago, IL 60606	(See instructions above.)	R	С	is substituted in section, so state.	E	Ď	D	
Merchants Cr 223 W. Jackson Blvd. Suite 400 Chicago, IL 60606 Chicago, IL 60608 Chicago, IL 60	Account No. xxxxxx1886			Opened 9/01/14	T	TE		
223 W. Jackson Blvd.				Collection Attorney Northwest Neurology Ltd.		D		
Suite 400 Chicago, IL 60606	Merchants Cr							
Chicago, IL 60606 261.00 Account No. 2015 accounting and tax serivces for businesses. Personal services only listed on this petition. 1,500.00 1,500.	223 W. Jackson Blvd.		-					
Account No. 2015 accounting and tax serivces for businesses. Personal services only listed on this petition. 1,500.00	Suite 400							
Account No. 2015 accounting and tax serivces for businesses. Personal services only listed on this petition. 1,500.00	Chicago, IL 60606							
Mowery and Associates 475 Half Day Rd Lincolnshire, IL 60069 Account No. xxxxxxxxxxxxx426 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxx448 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxx448 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxx448 Novient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxx448 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Subtotal								261.00
Mowery and Associates 475 Half Day Rd Lincolnshire, IL 60069 Account No. xxxxxxxxxxxxx426 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxx4418 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Subtotal	Account No			2015	H			
Account No. xxxxxxxxxxxxy426	Account No.							
475 Half Day Rd Lincolnshire, IL 60069 1,500.00 Account No. xxxxxxxxxxxx42426 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxx4418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxx4418 Account No. xxxxxxxxxxxx4418 Account No. xxxxxxxxxxxx4418 Account No. xxxxxxxxxxxx4418 Account No. xxxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no. 4 of 6 sheets attached to Schedule of	Mowery and Associates							
Lincolnshire, IL 60069			_	, ,				
Account No. xxxxxxxxxxxx426 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxxxxxxxxxxx418 Navient Po Box 9655 Wilkes Barre, PA 18773 Opened 1/01/08 Last Active 3/20/15 Educational Opened 1/01/08 Last Active 3/20/15 Educational 1,863.00 Account No. xxxxxxxxxxxxx4418 Account No. xxxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Neet no. 4 of 6 sheets attached to Schedule of Subtotal								
Account No. xxxxxxxxxxxxy9426	Lincoinsnire, IL 60069							
Account No. xxxxxxxxxxxxy9426								
Educational								1,500.00
Educational	Account No. xxxxxxxxxxxx9426			Opened 12/01/08 Last Active 3/20/15				
Po Box 9655 Wilkes Barre, PA 18773 X -								
Po Box 9655 Wilkes Barre, PA 18773 X -	Navient							
Account No. xxxxxxxxxxxx418		x	_					
Account No. xxxxxxxxxxxxx418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no. 4 of 6 sheets attached to Schedule of Account No. decount No. decount No. decount No. xxxx6749 Sheet no. 4 of 6 sheets attached to Schedule of Subtotal		^`						
Account No. xxxxxxxxxxxx418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no. 4 of 6 sheets attached to Schedule of Subtotal	Wilkes Balle, FA 10773							
Account No. xxxxxxxxxxxx418 Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no. 4 of 6 sheets attached to Schedule of Subtotal								
Navient Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no. 4 of 6 sheets attached to Schedule of Educational 1,863.00 Medical Services 905.00								6,390.00
Navient	Account No. xxxxxxxxxxxx9418							
Po Box 9655 Wilkes Barre, PA 18773 Account No. xxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no. 4 of 6 sheets attached to Schedule of Subtotal				Educational				
Wilkes Barre, PA 18773 Account No. xxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no4 of _6 sheets attached to Schedule of Subtotal	Navient							
Wilkes Barre, PA 18773 Account No. xxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no4 of _6 sheets attached to Schedule of 1,863.00 Medical Services 905.00	Po Box 9655	Х	-					
Account No. xxxx6749 Medical Services								
Account No. xxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no. 4 of 6 sheets attached to Schedule of								
Account No. xxxx6749 Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no. 4 of 6 sheets attached to Schedule of								1 863 00
Northshore University Health Sys 9532 Eagle Way Chicago, IL 60678 Sheet no. 4 of 6 sheets attached to Schedule of		Щ			\vdash			1,000.00
9532 Eagle Way Chicago, IL 60678 905.00 Sheet no. 4 of 6 sheets attached to Schedule of Subtotal	Account No. xxxx6749			Medical Services				
9532 Eagle Way Chicago, IL 60678 905.00 Sheet no. 4 of 6 sheets attached to Schedule of								
Chicago, IL 60678 905.00 Sheet no. 4 of 6 sheets attached to Schedule of Subtotal								
Sheet no. 4 of 6 sheets attached to Schedule of Subtotal			-					
Sheet no. 4 of 6 sheets attached to Schedule of Subtotal	Chicago, IL 60678							
Sheet no. 4 of 6 sheets attached to Schedule of Subtotal								
10 010 00								905.00
10 010 00	Sheet no. 4 of 6 sheets attached to Schedule of	Ш			l lub+	oto	<u>—</u>	
Creditors Holding Unsecured Nonpriority Claims (Total of this page) I								10,919.00
Creations from the Charles Charles (Total of this page)	Creditors Holding Unsecured Nonpriority Claims			(Total of the	nıs j	pag	e)	

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B6F (Official Form 6F) (12/07) - Cont.

In re	Michael I Harris	Case No	
		Debtor	

				-	1	-	
CREDITOR'S NAME,	CODEBTO	Hu	sband, Wife, Joint, or Community	- 6	UNLI	D	
MAILING ADDRESS	D	Н		N	ŀ	S	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	Ţ,	Q	U T E	AMOUNTE OF CLARA
AND ACCOUNT NUMBER (See instructions above.)	6	C	IS SUBJECT TO SETOFF, SO STATE.	G	1	Ė	AMOUNT OF CLAIM
(See instructions above.)	R	ľ		CONTINGEN	D A	D	
Account No.			1/9/2014	Т	A T E		
	1		Medical Services		D]
Northwest Neurology Ltd.	ı						
22285 N Pepper Rd #401	ı	-					
Barrington, IL 60010	ı						
g , - -	ı						
	ı						261.00
	┸			\perp			201.00
Account No. xxxx595D	1		Medical Services				
	ı						
Radiological Consultants of Woodsto	ı						
9410 Compubill Dr.	ı	-					
Orland Park, IL 60462	ı						
	ı						
							433.60
Account No.	t		Dental services	T			
	1						
Sandra A Smith DDS	ı						
18 East Gold Road	ı	l-					
Schaumburg, IL 60173	ı						
Schaumburg, IE 00173	ı						
	ı						134.64
							134.04
Account No. xxx3574 and xxx2048	1		Medical Services				
	ı						
St. Alexius	ı						
1555 Barrington Rd	ı	-					
Hoffman Estates, IL 60169	ı						
	ı						
	ı						7,648.89
Account No. x8479	T		2014			Π	
	1	1	Medical Services				
The Center for Sports Orthopae					1		
1585 N Barrington 101	ı	-					
Hoffman Estates, IL 60169					1		
l loman Estates, ie 00103	ı						
							250.00
							250.00
Sheet no. <u>5</u> of <u>6</u> sheets attached to Schedule of				Sub			8,728.13
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	0,720.13

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B6F (Official Form 6F) (12/07) - Cont.

In re	Michael I Harris	Case No.	_
_		Debtor	

						_		
CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	Co	U	[ıl	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	Ιũ	F U	S P U T E D	AMOUNT OF CLAIM
Account No. x3827	_		2011-2012	Т	E			
Thomas Pavlovic 415 W Golf Rd suite 16 Arlington Heights, IL 60005		-	medical srvices		D			2,694.75
Account No.	t		Legal services	T	t	t	1	
Wolfe & Stec 3321 Hobson Rd Woodridge, IL 60517		-						
								525.00
Account No. 1324 Woodfield Urology 806 E Woodfield Rd Schaumburg, IL 60173-4837		-	1-2/2013 Medical Services					
								1,059.00
Account No.	_							
Account No.								
				\perp			4	
Sheet no. _6 of _6 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub this			()	4,278.75
			(Report on Summary of So		Γot dul		- 1	56,229.85

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B6G (Official Form 6G) (12/07)

In re	Michael I Harris	Case No.
		Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Honda Financial P.O. Box 60001 City of Industry, CA 91716 Lease ending in #8752 on 2014 Honda Civic with 6,000 miles in excellent condition. Leased by M.I.Harris Financial, Inc. and not subject to discharge, but in debtor's possession and paid for personally.

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B6H (Official Form 6H) (12/07)

In re	Michael I Harris	Case No	
_		Debtor	

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Adam Harris	Aes/Nct
1121 W Addison	Aes/Ddb
Chicago, IL 60613	Po Box 8183
•	Harrisburg, PA 17105
Adam Harris	Aes/Nct
1121 W Addison	Aes/Ddb
Chicago, IL 60613	Po Box 8183
	Harrisburg, PA 17105
Amanda Harris	Fed Loan Serv
870 Dovington Court	Po Box 60610
Hoffman Estates, IL 60169	Harrisburg, PA 17106
Amanda Harris	Fed Loan Serv
870 Dovington Court	Po Box 60610
Hoffman Estates, IL 60169	Harrisburg, PA 17106
Amanda Harris	Navient
870 Dovington Court	Po Box 9655
Hoffman Estates, IL 60169	Wilkes Barre, PA 18773
Amanda Harris	Navient
870 Dovington Court	Po Box 9655
Hoffman Estates, IL 60169	Wilkes Barre, PA 18773

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Fill	in this information to identify y	our case:										
Del	otor 1 Michael	I Harris										
_	otor 2											
Uni	ted States Bankruptcy Court fo	or the: NORTHERN DISTRIC	CT OF IL	LINOIS								
	se number nown)		_					ed filing ent shov	ving post-petition cl	napter		
\bigcirc	fficial Form B 6I								e following date:			
	chedule I: Your I	noomo					MM / DD/ Y	YYYY		12/13		
sup spo atta	as complete and accurate as plying correct information. It use. If you are separated and ch a separate sheet to this formation. The describe Employn	you are married and not fili d your spouse is not filing w orm. On the top of any addit	ing joint ith you,	ly, and your s do not inclu	spouse de infor	is liv mati	ring with you, inc on about your sp	lude inf ouse. If	ormation about yo more space is ne	our eded,		
1.	Fill in your employment information.		Debto	or 1			Debtor 2	2 or nor	n-filing spouse			
	If you have more than one jo	b, Employment status	■ Em	ployed			■ Empl	loyed				
	attach a separate page with information about additional	Limployment status	□ No	t employed			☐ Not e	☐ Not employed				
	employers.	Occupation	Com	mercial Loa	an Brol	cer	Dental	Office	Manager			
	Include part-time, seasonal, self-employed work.	or Employer's name	MIH	arris Finan	cial, In	С	liberty	ville De	ntal Associates			
	Occupation may include stude or homemaker, if it applies.	dent Employer's address		Sweetflower nan Estates			_	1641 N Milwaukee Ave Libertyville, IL 60048				
		How long employed t	here?	15 years	s			6.5 yea	rs	_		
Par	t 2: Give Details Abou	t Monthly Income										
	mate monthly income as of succession use unless you are separated.	the date you file this form. If	you hav	e nothing to re	eport for	any	line, write \$0 in the	e space.	. Include your non-f	iling		
	ou or your non-filing spouse ha e space, attach a separate she		ombine t	he information	n for all	empl	oyers for that pers	son on th	ne lines below. If yo	u need		
							For Debtor 1		Debtor 2 or filing spouse			
2.		salary, and commissions (buthly, calculate what the month			2.	\$	0.00	\$	4,167.00			
3.	Estimate and list monthly	overtime pay.			3.	+\$	0.00	+\$	0.00			

0.00

4,167.00

Calculate gross Income. Add line 2 + line 3.

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Debt	or 1	Michael I Harris	_	Case	number (if known)			
				For	Debtor 1		Debtor 2 or n-filing spouse	
	Сор	y line 4 here	4.	\$	0.00	\$	4,167.00	
5.	List	all payroll deductions:						
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	917.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$ _	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	917.00	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	3,250.00	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e.	\$\$ \$\\$\$\$ \$\\$\$\$	3,000.00 0.00 0.00 0.00 0.00 0.00 0.00	\$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00 0.00 0.00	
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.		\$	3,000.00	\$_	0.00	
10	Cala	vulate monthly income. Add line 7 t line 0	10. \$		2 000 00	_	250.00 = \$	250.00
10.		the entries in line 10 for Debter 1 and Debter 2 or non filing appuise	10. \$		3,000.00 + \$_	3,	250.00 = \$	5,250.00
11.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00							
12.		the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certies					12. \$ Combine	
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes Explain:	n?				monthly	income

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Fill	l in this information to identify your case:					
Deb	btor 1 Michael I Harris		Che	eck if this is:		
Dok	btor 2		10	An amended filing		
	pouse, if filing)		A supplement showing post-petition chapter 13 expenses as of the following date:			
Uni	ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		MM / DD / YYYY			
Cas	se number				r Debtor 2 because Debtor	
(If k	known)			2 maintains a sepa	arate household	
0	Official Form B 6J					
S	chedule J: Your Expenses				12/13	
Be	e as complete and accurate as possible. If two married people are file formation. If more space is needed, attach another sheet to this form Imber (if known). Answer every question.					
_	nt 1: Describe Your Household					
1.	Is this a joint case? No. Go to line 2.					
	Yes. Does Debtor 2 live in a separate household?					
	□ No					
	☐ Yes. Debtor 2 must file a separate Schedule J.					
2.	Do you have dependents? □ No					
		Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state the	· an		40	□ No	
	dependents' names.	Son		18	■ Yes □ No	
	s	Stepdaughter		18	■ Yes	
	_	-			□ No	
		Daughter		20	Yes	
	ş	Spouse		53	□ No ■ Yes	
3.	Do your expenses include ■ No	-			■ res	
	expenses of people other than yourself and your dependents?					
	,					
Est	estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you a penses as of a date after the bankruptcy is filed. If this is a supplem plicable date.					
	clude expenses paid for with non-cash government assistance if yo					
	e value of such assistance and have included it on <i>Schedule I: Your</i> fficial Form 6I.)	r Income		Your exp	enses	
4.	The rental or home ownership expenses for your residence. Inclupayments and any rent for the ground or lot.	de first mortgag	e 4.	\$	2,600.00	
	If not included in line 4:					
	4a. Real estate taxes		4a.	\$	0.00	
	4b. Property, homeowner's, or renter's insurance		4b.		0.00	
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c. 4d.	·	100.00 250.00	
5.	Additional mortgage payments for your residence, such as home	equity loans	4u. 5.		155.00	

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Deb	tor 1 Michael I Harris	Case num	ber (if known)	
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	250.00
	6b. Water, sewer, garbage collection	6b.		50.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	330.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	750.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	150.00
10.	Personal care products and services	10.	\$	100.00
11.	Medical and dental expenses	11.	\$	500.00
12.	Transportation. Include gas, maintenance, bus or train fare.		_	450.00
	Do not include car payments.	12.		450.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	·	100.00
	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.	45-	¢.	00.54
	15a. Life insurance	15a.	· .	28.54
	15b. Health insurance	15b.	· -	934.00
	15c. Vehicle insurance	15c.	·	102.00
40	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Tax payment plan with IRS	16.	\$	700.00
17	Installment or lease payments:			700.00
	17a. Car payments for Vehicle 1	17a.	\$	478.00
	17b. Car payments for Vehicle 2	17b.	\$	197.00
	17c. Other. Specify:	17c.	· -	0.00
	17d. Other. Specify:	17d.	·	0.00
18.	Your payments of alimony, maintenance, and support that you did not report a		·	
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sch			
	20a. Mortgages on other property	20a.	· .	0.00
	20b. Real estate taxes	20b.	*	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	· -	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	*	0.00
	20e. Homeowner's association or condominium dues	20e.	·	0.00
21.	Other: Specify: Non filing spouse credit card payments	21.	+\$	1,600.00
22.	Your monthly expenses. Add lines 4 through 21.	22.	\$	9,824.54
	The result is your monthly expenses.			
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	· .	6,250.00
	23b. Copy your monthly expenses from line 22 above.	23b.	-\$	9,824.54
	22a Cubtract your monthly owners of frame your monthly in a con-			
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-3,574.54
	The result is your <i>monthly het income</i> .	200.	<u>.</u>	-,-

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain:

Debtor and spouse were married in January 2015 and past medical expenses were non-marital. Future medical expenses are unknown and estimated but debtor has many serious health issues which will impact both income and expenses.

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Michael I Harris			Case No.	
			Debtor(s)	Chapter	7
	DECLARATION C DECLARATION UNDER F			_	
	I declare under penalty of perjury the sheets, and that they are true and correct to the				es, consisting of 26
Date	June 18, 2015	Signature	/s/ Michael I Harris Michael I Harris Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois

In re	Michael I Harris		Case No.	
		Debtor(s)	Chapter	7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$15,305.00 2015 YTD: Debtor MI Harris/Finan\$co \$42,467.00 2014: Debtor MI Harris/Finan\$co

\$105,568.00 2013: Debtor MI Harris/Finan\$co

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$750.00 2014: Debtor Retirement acct withdrawal

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AMOUNT SOURCE

\$4,306.00 2013: Debtor Retirement acct withdrawal

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Honda Financial P.O. Box 60001 City of Industry, CA 91716 DATES OF **PAYMENTS** \$455 monthly on auto lease

AMOUNT PAID

AMOUNT STILL **OWING**

\$1.365.00 \$0.00

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> DATES OF PAYMENTS/ **TRANSFERS**

AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL **OWING**

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING**

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF **PROCEEDING** COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY**

BENEFIT PROPERTY WAS SEIZED

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Newland & Newland LLP 121 S. Wilke Ste #301 Arlington Heights, IL 60005 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR June 18, 2015 by Anna Meltzer, non-filing spouse. AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$2,365.00 plus \$335 filing fee.

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10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

E NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

■ Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAYPAYER-ID, NO

TAXPAYER-I.D. NO. NAME (ITIN)/ COMPLETE EIN

M I Harris Financial, 36-4253576 Inc

Finansco Commercial Mortgages, Inc. ADDRESS

920 Sweetflower Drive Hoffman Estates, IL 60169

920 Sweetlower Drive Hoffman Estates, IL 60169 NATURE OF BUSINESS

Consultant

Mortgage broker.
Although company now is a conduit and all funds received in this corporation are sent to MI Harris Financial.

BEGINNING AND ENDING DATES

9/25/1998 to current

8/21/2006 to present.

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

38-3741281

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS
Jeffrey Mowery
Mowery and Associates
475 Half Day Rd
Lincolnshire, IL 60069

DATES SERVICES RENDERED More than 10 years to current

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

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None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY
DATE OF INVENTORY
RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS TITLE NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY Case 15-21364 Doc 1 Filed 06/20/15 Entered 06/20/15 12:55:14 Desc Main Document Page 40 of 55

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24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date June 18, 2015

Signature /s/ Michael I Harris

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

United States Bankruptcy Court Northern District of Illinois

In re	re Michael I Harris		Case No.	
		Debtor(s)	Chapter	7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A reproperty of the estate. Attach additional pages if necessary property of the estate.)	
Property No. 1	
Creditor's Name: Bmo Harris Bank -	Describe Property Securing Debt: Personal residence at 920 Sweetflower Drive, Hoffman Estates IL 60169 Eppraisal . \$275,610 Zillow estimate \$279,109 Debtor believe based on area sales that value is \$260,000 but median Eppraisal number used for this petition
Property will be (check one):	
☐ Surrendered ■ Retained	
If retaining the property, I intend to (check at least one): ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain _ retain and pay as agreed _ (for example,	avoid lien using 11 U.S.C. § 522(f)).
Property is (check one):	
■ Claimed as Exempt	☐ Not claimed as exempt
Property No. 2	
Creditor's Name: Wells Fargo Hm Mortgag	Describe Property Securing Debt: Personal residence at 920 Sweetflower Drive, Hoffman Estates IL 60169 Eppraisal . \$275,610 Zillow estimate \$279,109 Debtor believe based on area sales that value is \$260,000 but median Eppraisal number used for this petition
Property will be (check one):	
☐ Surrendered ■ Retained	
If retaining the property, I intend to (check at least one): ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain reatin and pay upon successful workow	ut (for example, avoid lien using 11 U.S.C. § 522(f)).
Property is (check one):	
■ Claimed as Exempt	☐ Not claimed as exempt

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Page 2

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name: Honda Financial	Describe Leased Property: Lease ending in #8752 on 2014 Honda Civic with 6,000 miles in excellent condition. Leased by M.I.Harris Financial, Inc. and not subject to discharge, but in debtor's possession and paid for personally.	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): ■ YES □ NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date	June 18, 2015	Signature	/s/ Michael I Harris
		-	Michael I Harris
			Debtor

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United States Bankruptcy Court Northern District of Illinois

In re	e Michael I Harris		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR D	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 compensation paid to me within one year before the fillibe rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be paid	I to me, for services rendered or to
	For legal services, I have agreed to accept		\$	2,365.00
	Prior to the filing of this statement I have received			2,365.00
	Balance Due		\$	0.00
2.	\$335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	☐ Debtor ☐ Other (specify): Anna	Meltzer, debtor's non-filing	g spouse.	
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed comp	pensation with any other persor	unless they are mem	abers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
6.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ts of the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on how 	tement of affairs and plan which tors and confirmation hearing, a reduce to market value; ex ons as needed; preparation	h may be required; and any adjourned hear cemption planning	arings thereof;
7.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any di any other adversary proceeding.			ces, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	ny agreement or arrangement for	r payment to me for r	epresentation of the debtor(s) in
Date	ed: June 18, 2015	/s/ Gary Newland		
		Gary Newland 06		
		Newland & Newl 121 S. Wilke Ste		
		Arlington Height	s, IL 60005	
		(847) 797-8000 gary@newlandla	Fax: (847) 797-909 w.com	U

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Main Offices:

Libertyville Office:

1512 Artaius Parkway, Suite 300 Libertyville, Illinois 60048 Office: 847.549.0000 Fax: 847.549.1902

Arlington Heights Office:

121 S Wilke Road, Suite 301 Arlington Heights, Illinois 60005 Office: 847.797.8001 Fax: 847.797.9090 Newland & Newland, LLP

Arlington Heights - Libertyville - Crystal Lake - Waukegan - Itasca

00.

Bankruptcy Retainer Agreement

OUR LAW FIRM IS A DEBT RELIEF AGENCY.
WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

In consideration for services to be rendered to undersigned Client(s), ("Client") by Attorney, Newland & Newland, LLP, ("Attorney"), in connection with representing Client regarding bankruptcy matters, Client, jointly and severally, it is agreed as follows:

FEES AND CHARGES FOR SERVICES AND TERMS OF PAYMENT

Agreement is	ney accepts payment plans. An initial payment of \$\frac{250}{} is required at the time this Retainer signed. The Retainer shall be applied to the balance owed and shall not be an additional fee. Client onthly payments until paid in full.
2. A pay payment in fowith the cour	ment of \$ was paid on Client understands that Attorney requires full, including the court filing fee, prior to preparing Client's Bankruptcy Petition and filing same rt.
discharge DE, Department of click on the "courses of \$1 and one fee of class must be Trustee hearing	t is required to complete a law mandated pre-bankruptcy CREDIT COUNSELTING course and pre-BTOR EDUCATION course. Attorney works with an approved provider of the United States of Justice, (DECAF). You can access this through our website at www.newlandlaw.com/bankruptcy and Online BK Course" button on the left. Client is responsible for payment to DECAF for both 5 each (for the online version. Phone courses are \$35). Joint debtors will take the courses together f \$15 covers both. Client is free to take any bankruptcy approved course. CREDIT COUNSELING completed before case can be filed and DEBTOR EDUCATION course must be completed prior to the ng. Failure to complete the DEBTOR EDUCATION course before hearing date will subject client to se of \$250 if the case is closed without discharge in any circumstance.
	t acknowledges Attorney has explained the different types of retainers and based on that discussion as the sole right to decide the type of retainer has agreed the retainer shall be:
a.	A security retainer, where the funds are deposited into the Attorney's escrow account, without interest. Attorney shall provide client a billing statement when funds are drawn out of the account.
<u> </u>	An advance payment retainer, where the retainer is deposited directly into Attorney's business account and is considered the property of the Attorney. It is understood that this option is for Client's benefit as it is not subject to attachment by creditors.

If Client's income is from the operation of a business or as an independent contractor (1099), Attorney

requires payment of a fee for preparation of a Business Attachment.

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 - Client understands that when Attorney is paid in full and Client has provided Attorney will all required 6. forms and documents, Attorney will begin preparation of Client's petition.
 - Client understands that if after Client's Bankruptcy Petition is filed, Client notifies Attorney of a debt or any 7. other information that was that was omitted by Client, Client agrees to pay Attorney \$100.00 for each amendment to Client's Bankruptcy Petition plus any costs charged by the Court.
 - Client understands that if any check given in payment to Attorney is returned for insufficient funds, Client agrees to immediately pay Attorney a \$40.00 fee in addition to the amount of the returned check. This payment and any future payments must therefore be made in cash or certified funds.

Client's Schedule of Fees and Costs

•	Attorney Fee for Preparation and Representation of Chapter 7 Case:	\$	2280
•	Filing Fee (Chapter 7):	\$	335.00
•	Business Attachment:	\$_	
•	Reaffirmation Agreement(s): \$100 each agreement	\$_	
•	Other costs: credit reports, courier fees, return of documents to client and other direct expenses	\$	85.00
	TOTAL:	\$ _	2700

TERMS OF SERVICE

- 9. Attorney reserves the right to withdraw from Client representation if, among other things, Client fails to honor the terms of this Agreement, including non-payment of Attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all Attorneys in the State of Illinois and Attorney is an officer of the court. If a Client, in the course of representation by an Attorney, perpetrates a fraud upon any person or tribunal, the Attorney is obligated to call upon the Client to rectify the same.
- Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client 10. acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee.
- 11. Client agrees that Attorney may discard Client records within one (1) year of the completion of the Client's bankruptcy case.
- 12. Attorney shall provide Client with the following services:
 - Review and analyze Clients financial circumstances based on information provided by Client. a.
 - If possible and to the extent possible, based on the information provided by Client, advise Client b. of the Clients options, including but not limited to bankruptcy options.

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 - c. Inform Client what information Client needs to provide Attorney in order to allow Attorney to provide appropriate advice and option information, in the event such information Client provided is insufficient.
 - d. Advise Client of the appropriate requirements in connection with the filing of a Chapter 7 or Chapter 13 bankruptcy, including the duties of Client connected with such filing.
 - e. Quote the Client an estimated fee, to the extent possible given the information provided by Client, for the Attorneys service relative to providing bankruptcy assistance or other legal services to Client.
 - f. Assuming that a U.S. Bankruptcy proceeding is filed, Attorney services will include all typical Attorney required participation in such proceeding, including but not limited to, appearance at Client's 341 Meeting of Creditors, communications with Client's case trustee as well as the US Trustee, and communication with creditors, when appropriate.
 - g. If Client's proceeding requires additional, but not customary work, Attorney will inform Client directly, and enter into a separate written contract for such services to fully apprise Client of the fees, payment requirements, and expected services to be provided. Attorney's hourly rate for non-customary work is \$300.
 - h. Attorney will utilize paralegal support in the collection of data and preparation of the petition. Paralegals can address most issues related to the filing on an informational basis and can explain processes but cannot give specific advice applying the law to your situation. Attorney may utilize inhouse paralegals or employ, through contract, an outside paralegal service, specifically, Fairplay Paralegal Services, LLC, for assistance in preparation of petitions and will notify client when outside services are being utilized. Client agrees to cooperate with contracted paralegals in the same manner as in-house employees of Newland and Newland, LLP.
 - 13. Client acknowledges his/her obligation to make full and complete disclosure of all assets and all liabilities, and to provide all documents and information requested by the Attorney, before the bankruptcy petition can be prepared and filed with the court.
 - 14. **CREDIT COUNSELING.** Client acknowledges that he/she must complete pre-bankruptcy CREDIT COUNSELING before the bankruptcy petition can be filed. Client understands that he/she must also complete pre-discharge financial management course after the bankruptcy petition is filed and prior to the creditor/trustee hearing. Client acknowledges that the bankruptcy cannot be filed without the certificate of completion of the pre-bankruptcy credit counseling. Client agrees to complete the pre-discharge DEBTOR EDUCATION course prior to Client's Section 341 Meeting of Creditors. Client further understands that no discharge of debts will be issued if the post-bankruptcy DEBTOR EDUCATION course is not completed prior to the Trustee/Creditor hearing, that additional fees of up to \$250 will be assessed if the case closes without discharge in any circumstance.
 - 15. Client acknowledges that, on the basis of this agreement, Attorney does not represent Client in any other type of case, lawsuit or proceeding other than Client's bankruptcy case. The Attorney may make a special appearance in a court, other than the Bankruptcy Court, for the purpose of filing a notification of Clients bankruptcy proceedings, and to suggest to another court that Clients proceedings should be stayed. Sending or receiving any summons or complaint, or notifying the Attorney of a pending lawsuit does not obligate the Attorney to represent Client in that lawsuit or before that court. Any representation of Client in a state court proceeding, including without limitation: collection lawsuits, foreclosure lawsuits, and etc., is not included in this Bankruptcy Retainer Agreement. Any referral made to another Attorney to represent Client is a courtesy only. The Attorney is not associated with any other Attorney outside of the undersigned Attorneys law offices.

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- 16. Client acknowledges that the Attorney will not research creditor information, including addresses, account numbers, or balances. The Client must provide this information to the Attorney in writing. Failure to do so may result in unscheduled debts subject to non-dischargeability.
- 17. Client agrees that the following matters are not included within the scope of this Bankruptcy Retainer Agreement. Client agrees that, as to the matters listed below, the Attorney will not take any action on Clients behalf, without a written request and/or a separate Retainer Agreement and possibly an additional retainer:
 - a. Motions to revoke a discharge.
 - b. Removal of a pending action in another court.
 - c. Obtaining title reports.
 - d. The determination of real estate or tax liens.
 - e. Appeals to the District Court of Court of Appeals.
 - f. Correcting credit reports.
 - g. Negotiations with Check Systems regarding Client.
 - h. Motions to Discuss Client's bankruptcy case filed by the Trustee, U.S. Trustee, or any creditor.
 - i. Any adversary proceeding filed by the Trustee, U.S. Trustee, or any other party on any basis, including, without limitations, proceedings to determine dischargability of debts.
 - j. Negotiating reaffirmation agreements when Clients income is not sufficient to rebut the presumption of undue hardship and special circumstances do not warrant the signing of a reaffirmation agreement.
 - k. Motions to redeem personal property.
 - 1. Motion to impose or extend the bankruptcy stay.
- 18. LIENS. A Bankruptcy does not automatically discharge or remove liens from any real estate. Client agrees that the Attorney will not take any action to avoid (remove) any lien on real estate unless Client specifically authorizes the Attorney to do so in writing. Client agrees that the Attorney will rely on Clients statements concerning ownership of real property and any liens attached to Clients real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will not conduct a public records search for lawsuits filed against Client or judgments granted against Client. Client must separately order and pay for a real estate title search, or public records search for lawsuits or judgments, if Clients wishes to obtain one. Client agrees to hold the Attorney harmless if client later discovers liens, lawsuits or judgments against Client or against Clients real estate.
- 19. Client understands that individuals who file for relief under Chapter 7 or Chapter 13 of the Bankruptcy Code are subject to audits by the U.S. Trustee. If Client's case is selected for an audit, Client agrees to pay Attorney the customary hourly rate for representing Client in such audit.
- 20. Due to scheduling issues, Attorney may have an attorney outside of Attorney's firm attend the Client's 341 Meeting of Creditors and Client consents to said action.
- 21. The undersigned acknowledges agreement with the terms of the Bankruptcy Retainer Agreement.

Dated: June 18, 2015	
Single Filing	☐ Joint filing
Client Signature	Client Spouse Signature
Michael Varis Client Printed Name	Client Spouse Printed Name
Attorney in Newtond j Newton	1

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201A (Form 201A) (6/14)

B 201B (Form 201B) (12/09)

	Uni	ted States Bankruptcy Cour Northern District of Illinois	:t	
In re	Michael I Harris		Case No.	
		Debtor(s)	Chapter 7	
Code.		OF NOTICE TO CONSUME 42(b) OF THE BANKRUPTC' Certification of Debtor ave received and read the attached notice	Y CODE	•
Micha	el I Harris	${ m X}$ /s/ Michael I Har	ris	June 18, 2015
Printed	d Name(s) of Debtor(s)	Signature of Deb	tor	Date
Case N	No. (if known)	X		
		Signature of Joint	t Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Northern District of Illinois

		Northern District of Illinois		
In re	Michael I Harris		Case No.	
		Debtor(s)	Chapter 7	
	VI	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	41
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credit	tors is true and correct to	the best of my
Date:	June 18, 2015	/s/ Michael I Harris		

Adam Harris 1121 W Addison Chicago IL 60613

Advocate Medical Group - Cardiology 75 Remittance Drive Suite 1773 Chicago IL 60675-1773

Advocate Medical Group- Cardiology 1901 S Meyers Road, Suite 350 Villa Park IL 60181

Aes/Nct Aes/Ddb Po Box 8183 Harrisburg PA 17105

Amanda Harris 870 Dovington Court Hoffman Estates IL 60169

American Express Po Box 3001 16 General Warren Blvd Malvern PA 19355

Bakal Dermatology Associates 1786 Moonlake Blvd #100 Hoffman Estates IL 60169-1016

Bmo Harris Bank -Bankruptcy Dept.-Brk-1 770 N Water Street Milwaukee WI 53202

Cadence-Central Dupage Hospital 25 North Winfield Road Winfield IL 60190

Cda/pontiac Attn:Bankruptcy Po Box 213 Streator IL 61364 Chase Bp Prvt Lbl Po Box 15298 Wilmington DE 19850

Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20363 Kansas City MO 64195

Drs Garb & Mcguire 1710 N Randall Road 250 Elgin IL 60123-9408

Fed Loan Serv Po Box 60610 Harrisburg PA 17106

HRRG PO Box 5406 Cincinnati OH 45273-7942

Illinois Collection Service/ICS Illinois Collection Service Po Box 1010 Tinley Park IL 60477

Insomnia Treatment Specialists 3633 West Lake Av #404 Glenview IL 60026-5801

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia PA 19101-7346

Kathleen Harris 870 Dovington Court Hoffman Estates IL 60169

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls WI 53051 Life Watch 10255 W Higgins Rd Des Plaines IL 60018-5606

Malcolm S Gerald and Assoc 332 South Michigan Ave suite 600 Chicago IL 60604

Med Business Bureau Po Box 1219 Park Ridge IL 60068

Medical Recovery Specialists 2250 E. Devohn Ave., Ste. 352 Des Plaines IL 60018

Merchant's Credit Guide Department #7505 PO Box 1259 Oaks PA 19456

Merchants Cr 223 W. Jackson Blvd. Suite 400 Chicago IL 60606

Mowery and Associates 475 Half Day Rd Lincolnshire IL 60069

Navient Po Box 9655 Wilkes Barre PA 18773

Northshore University Health Sys 9532 Eagle Way Chicago IL 60678

Northwest Neurology Ltd. 22285 N Pepper Rd #401 Barrington IL 60010

Radiological Consultants of Woodsto 9410 Compubill Dr. Orland Park IL 60462

Sandra A Smith DDS 18 East Gold Road Schaumburg IL 60173

SIMM Associates, Inc. 800 Pencader Dr. Newark DE 19702

St. Alexius 1555 Barrington Rd Hoffman Estates IL 60169

State Collection Service Inc. 2509 S Stoughton Rd Madison WI 53716

The Center for Sports Orthopae 1585 N Barrington 101 Hoffman Estates IL 60169

Thomas Pavlovic 415 W Golf Rd suite 16 Arlington Heights IL 60005

Van Ru PO Box 1259 Oaks PA 19456

Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick MD 21701

Wolfe & Stec 3321 Hobson Rd Woodridge IL 60517

Woodfield Urology 806 E Woodfield Rd Schaumburg IL 60173-4837